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Under the paperwork	Reduction Act of 1995, no persons are req			DEPARMENT OF COMMERCE ays a valid OMB control number	
ETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional)			
FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		073612.0105			
Application Number 09/829.784		Filed 04/09/2001			
For Method and	d System for Facilitating N	Mediated Commur	nication		
Art Unit 2173			Examiner Blaine	Examiner Blaine T. Basom	
This is a request unapplication.	der the provisions of 37 CFR 1.13	6(a) to extend the perio	d for filing a reply in the	above identified	
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):					
		<u>Fee</u>	Small Entity Fee		
✓ One m	nonth (37 CFR 1.17(a)(1))	\$120	\$60	\$_60.00	
Two m	nonths (37 CFR 1.17(a)(2))	\$450	\$225	\$	
Three	months (37 CFR 1.17(a)(3))	\$1020	\$510	\$	
Four n	nonths (37 CFR 1.17(a)(4))	\$1590	\$795	\$	
Five m	nonths (37 CFR 1.17(a)(5))	\$2160	\$1080	\$	
Applicant claims	s small entity status. See 37 CFR	1.27.			
A check in the amount of the fee is enclosed.					
Payment by credit card. Form PTO-2038 is attached.					
The Director has already been authorized to charge fees in this application to a Deposit Account.					
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-2148 I have enclosed a duplicate copy of this sheet.					
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
I am the	applicant/inventor.				
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).					
attorney or agent of record. Registration Number 48,363					
	attorney or agent under 37 CF Registration number if acting under	FR 1.34. er 37 CFR 1.34			
= 1:	e b Hy		Mar. 16	2006	
Paula D. Heyman		512.322.2581			
Typed or printed name		Telephone Number			
NOTE: Signatures of all tr signature is required, see	ne inventors or assignees of record of the er below.	ntire interest or their represent	ative(s) are required. Submit n	nultiple forms if more than one	
Total of	forms ar	e submitted.			